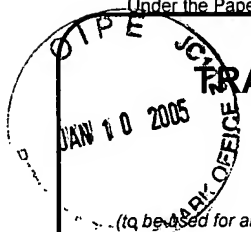


376/Ifw

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031  
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FORM

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Total Number of Pages in This Submission

Application Number	10/056,251
Filing Date	January 24, 2002
First Named Inventor	FLEISCHMANN, Wilhelm
Art Unit	3761
Examiner Name	LEWIS, Kim M.
Attorney Docket Number	VAC.726A.US

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Acknowledgment Postcard
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Kinetic Concepts, Inc.		
Signature	<i>Robert W. Mason</i>		
Printed name	Robert W. Mason		
Date	5 January 2005	Reg. No.	42,848

## CERTIFICATE OF TRANSMISSION/MAILING

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Signature	<i>Robert W. Mason</i>		
Typed or printed name	Robert W. Mason	Date	5 January 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

App. No. : 10/056,251 Confirmation No. 9084  
Inventor : FLEISCHMANN, Wilhelm  
Filed : January 24, 2002  
Group Art Unit : 3761  
Examiner : LEWIS, Kim M.  
Docket No. : VAC.726A.US  
Customer No. : 30159  
Title : PROCESS AND DEVICE FOR APPLICATION OF ACTIVE  
SUBSTANCES TO A WOUND SURFACE AREA

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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<u>01/05/05</u> Date	<u>Robert W. Mason</u> Robert W. Mason

**37 CFR § 1.312 AMENDMENT**

Dear Sir or Madam:

**Amendments to the Claims** are reflected in the listing of the claims, which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 3 of this paper.